

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	SYSTEM AND METHOD FOR TREATMENT OF INDUSTRIAL WASTEWATER BROOK-LEVI3
Attorney Docket Number::	
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israeli
Status::	Full Capacity

Given Name:: Edward
Middle Name::
Family Name:: BROOK-LEVINSON
Name Suffix::
City of Residence:: Petach Tikva
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 11 Hana Senesh Street
City of Mailing Address:: Petach Tikva
State or Province of Mailing Address:: 49507
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address::
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israeli
Status:: Full Capacity
Given Name:: Yevgenia
Middle Name::
Family Name:: DOBROKHOTOV
Name Suffix::
City of Residence:: Herzliya
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 7 Revavim Street
City of Mailing Address:: Herzliya
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 46240
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israeli
Status:: Full Capacity
Given Name:: David
Middle Name::
Family Name:: GUREVICH

Name Suffix::

City of Residence:: Ariel
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 4 Hevron Street
City of Mailing Address:: Ariel
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 44837

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	National Stage of	PCT/IL05/000172	02-10-05

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Israel	160384	02-12-04	Yes

Assignment Information

Assignee Name:: Uniqkleen-Wastewater Treatment Ltd.
Street of Mailing Address:: P.O. Box 73
City of Mailing Address:: Migdal Ha'emek
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 23100